

## ASSOCIATION OF EMERGENCY CARE TRAINING PROVIDERS INC

*Promoting quality in emergency care training*

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2 April 2025

### **Submission on Draft Consent and Moderation Requirements**

*Submitted by the Association of Emergency Care Training Providers (AECTP)*

#### **Introduction**

This submission outlines key points for consideration in the new draft Consent and Moderation Requirements (CMR) document, highlighting areas for improvement, clarification, and alignment. While the new draft introduces several improvements, it does not fully accommodate the nuances of the first aid training industry. We have identified specific areas where further refinements are necessary to ensure clarity, consistency, and practicality in implementation.

#### **Key Points for Consideration**

##### **1. Industry recognition and regulatory body**

The draft mentions contact with a regulatory industry body but lacks specificity. We recommend explicitly mentioning the Association of Emergency Care Training Providers (AECTP) as the recognised body for clarity and ensuring alignment with industry standards.

##### **2. Alignment with requirements**

The document needs better alignment with specific requirements to ensure it accurately reflects the needs of the first aid training industry. There is ambiguity regarding the relationship between the “particular skills and knowledge of teachers and assessors” in the draft and those in Appendix 2. We seek clarification on whether Appendix 2 is intended to supplement the main body of the document or if it serves as the definitive interpretation of those requirements.

##### **3. Equivalency of qualifications**

The qualification reference in the main body versus Appendix 2 sets a high bar. The requirement for one level above should be clarified in the appendix to ensure a clear interpretation for our industry. This would provide a key value to training providers by creating a straightforward reference point when dealing with external parties. We propose adding a table of equivalencies to provide a clear reference for comparable qualifications, ensuring fair recognition across training providers.

##### **4. Staff involved in assessment design and moderation requirements**

Having all staff involved in assessment design and moderation meet the minimum requirements stated is unrealistic, considering we seek input for all trainers. We propose rewording the requirement to state: ‘The applicant TEO must have policies and procedures to ensure assessment

design and moderation involves staff that meet the following minimum requirements: 'ensuring flexibility while maintaining high training standards. It was noted that the draft includes an 'easy way out' by including the wording "or can demonstrate equivalent knowledge and skills."

## **5. Removal of key elements**

The updated draft no longer includes a minimum duration for the teaching and assessment of basic first aid unit standard-based courses, The removal of a defined minimum duration for first aid courses may lead to inconsistencies in training quality. We recommend reinstating these minimum durations to maintain nationwide consistency.

## **6. Stability of compliance documents**

The First Aid as a Life Skill (FALS) document will no longer contain the reference to it being a 'living document,' which should also be maintained for consistency across all documentation. The 'living document' status of a compliance document creates an unstable environment for training providers to create structured and predictable training programmes that align with long-term regulatory requirements and industry expectations.

## **7. CPR manikin requirements**

The requirement for using infant, child, and adult CPR manikins has been removed from the draft. We recommend explicitly stating these requirements in the appendix or the FALS document to ensure comprehensive training across all age groups using the appropriate equipment.

## **8. Relationship between CMR, FALS, and Appendix 2**

The relationship between the main CMR document, FALS, and Appendix 2 needs to be better aligned to ensure consistency. See example below:

- The main body of the draft states "[assessing staff] Hold unit standard 4098 or can demonstrate equivalent knowledge and skills." Appendix 2 states "Instructors must be trained in standards-based assessment. They must have obtained credit for unit standard 4098." There is no mention of equivalent knowledge and skills.

## **9. Minimum language requirements**

Unit Standard 6402 v8 mentioned "that persons can be trained in basic life support providing that they are able to understand the principles and the technique(s)." There is now little guidance for training providers to determine what constitutes sufficient language comprehension to ensure learners can meet safety and compliance requirements. We recommend reinstating clear language proficiency criteria for learners to ensure they can fully comprehend first aid principles, reducing ambiguity and the burden on trainers.

## **10. Professional development and industry engagement**

In relation to the pre-hospital emergency care training domain, the draft includes a requirement for an additional 120 hours of work experience, which is not always practical. Does this apply to organisations who provide training in unit standard 29321, provide basic emergency care, as a standalone course? Instead, we propose providing relevant professional development across the year to ensure trainers stay updated with the latest guidelines and best practices.

## **11. Revised Appendix 2: First Aid Sector Requirements for Consent to Assess**

The following revisions to Appendix 2 clarify key requirements for first aid trainers and assessment providers, ensuring consistency with industry best practices and maintaining training quality.

### **A - Particular skills and knowledge of teachers and assessors**

*Domain: First Aid*

*Specific requirements:*

Applicant TEOs must be able to ensure that:

- Instructors must have first aid unit standards 6402, 6401, and 6400 and maintain a current first aid certificate through revalidation training.
- Instructors must have unit standards in the [Emergency Care - First Response](#) domain (e.g., 29321 or the expired 14470-14773) or demonstrate equivalent knowledge and skills.
- Instructors must be trained in standards-based assessment. They must have obtained credit for [unit standard 4098](#).
- Instructors must hold a current [New Zealand Resuscitation Council Emergency Care Instructor Certificate](#) or demonstrate equivalent knowledge and skills.
- Instructors must maintain currency in first aid knowledge, skills, and best practice in teaching and assessment through annual professional development.

### **B - Special resources required for assessing against the standards**

*Domain: First Aid*

*Specific requirements:*

Applicant TEOs must be able to ensure that:

- three types of resuscitation manikins are available for learners to practice on. These must be an infant, a child, and an adult CPR manikin;
- sufficient individual access to all three types of CPR manikins and time for individuals to demonstrate competence is provided;
- sufficient materials and resources are available to enable learners to be assessed;
- sufficient individual access and time on all three types of CPR manikins for individuals to practice skills prior to assessment.

The duration of first aid training must meet the following minimum requirements and the criteria of the Unit Standard:

- For training including assessment of unit standards 6400, 6401, and 6402 (New Zealand First Aid Certificate) – a minimum of 12 hours training and assessment, including three 15-minute breaks (excluding lunch breaks).
- For training including assessment of unit standards 6401 and 6402 (Foundation First Aid Certificate) – a minimum of eight hours of training and assessment, including two 15-minute breaks (excluding lunch breaks).
- For unit standard-based revalidation training – a minimum of six hours of training and assessment, including one 15-minute break (excluding lunch breaks).

Further information about requirements for providing standard-based first aid training is provided in *First Aid as a Life Skill: Training Requirements for Quality Provision of Unit Standard-based and Revalidation First Aid Training and Assessment*. This document is published on the [toitutewaiora.nz](http://toitutewaiora.nz) website.

All providers with consent to assess against unit standards 6400, 6401, and 6402 will be contacted by email when new versions of the document are published.


## Conclusion

In conclusion, AECTP believe these changes will enhance the CMR document, make sure it aligns more closely with the specific needs of the first aid training industry.

Thank you for considering our feedback. We welcome any further discussion or clarification as needed.

Please direct all communication to Bianca Petrie, our Executive Officer via email [bianca@aectpnz.org](mailto:bianca@aectpnz.org)

Ngā mihi,



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